

ILWU-PMA BENEFIT PLANS /

International Longshore & Warehouse Union –
Pacific Maritime Association **www.benefitplans.org**

1188 FRANKLIN STREET • SUITE 101 • SAN FRANCISCO, CALIFORNIA 94109

PHONE (415) 673-8500

FAX (415) 749-1400

ILWU-PMA Pension Plan
ILWU-PMA Welfare Plan

ILWU-PMA Watchmen Pension Plan

September 12, 2017

TO: ILWU Longshore, Ship Clerks and Walking Boss/Foremen Locals

FROM: Mario Perez, Manager, Welfare Plans

SUBJECT: Request for Medicare Part B Premium Information

Enclosed is a copy of the notice mailing to pensioners and beneficiaries requesting proof of their 2017 Medicare Part B premium amount. The request is to ensure the Plan is reimbursing the correct monthly premium amount.

Enclosure

A copy of this memo can be downloaded at www.benefitplans.org

ILWU-PMA Pension Plan
ILWU-PMA Welfare Plan

ILWU-PMA Watchmen Pension Plan

September 2017

**Subject: ILWU-PMA Welfare Plan
Proof of 2017 Medicare Part B Premium**

For many participants, Medicare Part B premiums change annually. To ensure you are being reimbursed the correct premium, the Benefit Plans Office is requesting all pensioners and beneficiaries to submit proof of their 2017 Medicare Part B premium.

Acceptable proof would be a copy of your Social Security Administration letter or "Notice of Medicare Premium Payment Due" indicating the 2017 Medicare Part B premium. If you misplaced or do not have your letter/notice, you can contact the Social Security Administration at 1-800-772-1213 to request another copy.

Please submit your letter/notice as soon as possible. A postage-paid return envelope is enclosed for your convenience. You may also fax your letter/notice to 415-749-1400.

Failure to provide the requested information will result in reduction of your Medicare Part B premium reimbursement.

Below is a list of members currently eligible for Medicare per Plan records:

If you have any questions, please contact the Benefit Plans Office at 415-673-8500.

Enclosure